# **APPLICATION DATA SHEET**

#### APPLICATION INFORMATION

Application Date:: 01/22/02
Application Type:: REGULAR

Subject Matter::

CD-ROM or CD-R?::

NONE

Title:: THERMOFORMING MULTILAYER FILM

FOR PROTECTING SUBSTRATES,

AND OBJECTS OBTAINED

Attorney Docket Number:: ATOFINA-244

## INVENTOR INFORMATION

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Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: FRANCE

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Country of Residence::

FRANCE

Country of Residence:: FRANCE
Street of Mailing Address:: 6, rue du 19 mars 1962

City of Mailing Address:: Evreux
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 27000

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: FRANCE

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Country of Residence::

Franck

Bertoux

Puteaux

FRANCE

Street of Mailing Address:: 35, rue de la République

City of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

92800

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: FRANCE

Status:: FULL CAPACITY

Given Name:: Philippe
Family Name:: Bussi

City of Residence::

Bernay

Country of Residence::

**FRANCE** 

Street of Mailing Address::

Résidence Clairval - Immeuble Saphir 4,

chemin de la Planquette

City of Mailing Address::

Bernay

Country of Mailing Address::

**FRANCE** 

Postal or Zip Code of Mailing Address::

27300

Applicant Authority Type::

INVENTOR

Primary Citizenship Country::

**FRANCE** 

Status::

**FULL CAPACITY** 

Given Name::

Anthony

Family Name::

Bonnet

City of Residence::
Country of Residence::

Serquigny FRANCE

Street of Mailing Address::

26, rue des Terriers

City of Mailing Address::

Serquigny

Country of Mailing Address::

**FRANCE** 

Postal or Zip Code of Mailing Address::

27470

**CORRESPONDENCE INFORMATION** 

Correspondence Customer Number::

23599

REPRESENTATIVE INFORMATION

Representative Customer Number::

23599

## FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
0100879	France	01/22/01	YES

## **ASSIGNMENT INFORMATION**

Assignee Name::

**ATOFINA** 

Street of Mailing Address::

4/8, cours Michelet

City of Mailing Address::

Puteaux

Country of Mailing Address::

**FRANCE** 

Postal or Zip Code of Mailing Address::

92800